Southern African Gas Association NPC
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APPLICATION FOR FIRST TIME REGISTRATION AS AN AUTHORISED PERSON WORKING IN THE SPECIALISED NATURAL GAS INDUSTRY

I hereby apply for registration as an authorised person (gas practitioner) in terms of Regulation 17 (1) (c) of the Pressure Equipment Regulations and the SAQCC Gas

*NB: In the interest of speedy processing of your application, it is imperative that you complete all required fields and fully comply with the **SAGA Gas Practitioner Scope and Competency Policy (as amended)** being practitioner and industry criteria (publication is available on request or visit www.sagas.co.za.*

All information and proof provided comprises the applicants Portfolio of Evidence.

The following is to accompany this application:

1. Two (2) colour passport photo's - *endorsed on reverse side with own name and ID no*
2. Certified copy of valid ID or passport

Initials	
First name	
Surname	
ID no.:	
Self employed	☐ Yes ☐ No
Employer	
Tel	
Cell	
Email	

EMPLOYER POSTAL ADDRESS		**EMPLOYER STREET ADDRESS**	
Address		**Address**	
Suburb / Town		**Suburb / Town**	
Province		**Province**	
Postal code		**Postal code**	

1. INDICATE WHICH JOB DESCRIPTION & FIELD OPTION IS APPLICABLE TO YOUR REGISTRATION *(SASOL & EGOLI GAS REGISTRATIONS ONLY)*

Job Description:

Millwright	❑	Artisan	❑
Operator	❑	Team Leader	❑

Field Option:

Mechanical	❑	Electrical	❑
Instrumentation	❑	Production	❑
Inspection	❑	SHEQ`	❑

(***Ensure your Line Manager/Supervisor is in agreement with the above)***

RECOMMENDATION BY LINE MANAGER / SUPERVISOR:

I, Name: _____ Surname:_____ being the ***Line Manager/ Supervisor*** *(cross out which is not applicable) hereby confirm that the above registration categories are in line with the applicant's job description and as such recommended for registration.*

Signature: _____ **Date:** _____

Email: _____ **Contact Number:** _____

2. QUALIFICATIONS *(Legible copies to be attached to application form)*

Secondary Education:	
Major Subjects	
Level Attained	
Period	**From:** **To:**

Tertiary Education:	
Major Subjects	
Final Qualification	
Period	**From:** **To:**

Apprenticeship/learnership served as	
Period:	**From:** **To:**
Employer during apprenticeship/learnership:	
Other qualifications or achievements including training and/or specific skills courses attended:	

3. EMPLOYMENT HISTORY *(Chronological Order)*

Present Employer:

Period	**From:** **To:**
Employer	
Type of business	
Position Held	

Previous Employer:

Period	**From:** **To:**
Employer	
Type of business	
Tel of business	
Position Held	

Previous Employer:

Period	**From:** **To:**
Employer	
Type of business	
Tel of business	
Position Held	

4. GAS EXPERIENCE *(Please take note of the required information and complete **Part A** **or** **B**)*

4.1 Part A – Persons providing independent/contractual services to Users:

- *Description of the last 5 chronological gas piping and pipeline projects or installation work done during the period, including magnitude and scope, duties and level of responsibility of each installation as to design, inspection, testing, piping; maintenance, modifications, repair and installations done*
- *Indicate the min/max pressure used during the period of installation.*
- *Under whose supervision did you work during the period of installation and provide proof of CoC's issued while under supervision substantiating your involvement.*

4.2 Part B – Persons working on company internal pipelines e.g. *Gas piping and pipeline installations, maintenance, repairs, alterations and/or inspection of work done during the period employed by the company, including magnitude, scope and level of responsibility for each installation*

Detailed description of work done as required in paragraph 4.1 or 4.2 to be completed on Annex A. Duplicate Annex A for each project provided.

I hereby confirm that

1. ***All the information included within this application is true and valid and that I will adhere to the registration requirements namely:***
    a. ***To complete the gas practitioner application in full.***
    b. ***Pass required course with an aggregate of 80%***
    c. ***Should there be any outstanding documentation needed for the processing of the application not received within 3 months of date of receipt of the application, it will be deemed null and void and I forfeit the full course and registration fee***

2. ***I have also read and clearly understand the content of the following: (available on request or visit www.sagas.co.za)***
    a. ***Technical Regulation 1 of 2009 (as amended).***
    b. ***Competition and Anti–Trust Policy and Meeting Rules***
    c. ***SAQCC Code of Good Practice***
    d. ***Gas Practitioner Scope and Competency Policy***
    e. ***Terms and Conditions of Training***

3. ***Kindly take notice that attendance and completion of the training course is not in itself sufficient to obtain registration as an authorised gas practitioner in one or more of the various categories of registration. Accordingly, it is imperative that you read and be guided by the SAGA Gas Practitioner Scope and Competency Policy with regards to all relevant and applicable registration requirements.***

4. ***Without detracting from any lawful purpose for processing of personal information in terms of the Protection of Personal Information Act No 4 of 2013, the Gas Practitioner hereby consents to and authorises SAGA to process its Personal Information by disclosing same with a third party for the purpose of pursuing the legitimate interests of SAGA and or the third party by for example providing information and related documentation pertaining to:***
    - ***Your status of registration;***
    - ***The gas type and categories for which you are registered; and***
    - ***Certificates of Conformity issued by you.***

5. ***The SAQCC GAS NPC has been officially appointed and mandated by the Department of Employment and Labour to register gas practitioners within the various gas industries in South Africa, as represented by the four member associations in respect of which Southern African Gas Association NPC is one. Accordingly, your personal information will/may be received via member Association's for processing by the SAQCC GAS NPC however such processing will be compliant with the Protection of Personal Information Act No 4 of 2013 and only to perform its functions as mandated or as otherwise allowed by law. For more information about the SAQCC GAS NPC you can visit its website at www.saqccgas.co.za***

6. ***I may only perform work within the borders of South Africa as per the registered scope of my SAQCC Gas licence***

Name: _____ ***Signature:*** _____ ***Date:*** _____

Forward application to: lerato@sagas.co.za

ANNEX A

Project No	
Date	
Project Name	
CoC #	
Pipe Size and Pressure	
Level of Responsibility	
Contact Person	
Contact Number	
Description of project and work done	